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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/622,373	
	Filing Date	July 18, 2003	
	First Named Inventor	Jennifer L. Whistler	
	Group Art Unit	1646	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	//	Attorney Docket Number	316E-001510US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Copy of Executed Assignment	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Executed Declaration	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Drawings	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Letter to Official Draftsperson	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Substitute Specification	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Executed Power of Attorney and 3.73b Certificate	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	receipt acknowledgment postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Copy of Notice to File Missing Parts	Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.	
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Emily M. Haliday, Reg. No. 38,903, Quine Intellectual Property Law Group P.C.
Signature	<i>Emily M. Haliday</i>
Date	Dec. 16, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Tracie Brooks		
Signature	<i>Tracie Brooks</i>	Date	Dec 16, 2003



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QUINE INTELLECTUAL PROPERTY LAW GROUP P.C.

By Tracie Brooks
Tracie Brooks

Attorney Docket No. 316E-001510US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Jennifer L. Whistler et al.

Examiner: Unassigned

Art Unit: 1646

Application No.: 10/622,373

Filed: July 18, 2003

TRANSMITTAL LETTER - RESPONSE
TO NOTICE OF MISSING PARTS

For: **METHODS AND COMPOSITIONS FOR
MODULATING AGONIST-INDUCED
DOWNREGULATION OF G PROTEIN-
COUPLED RECEPTORS**

MAIL STOP MISSING PARTS
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Sir:

Pursuant to the "Notice to File Missing Parts of Application - Filing Date
Granted" dated October 20, 2003, enclosed are the following to be made of record in the above-
identified application:

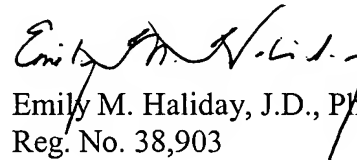
- 1) Executed Declaration
- 2) Copy of Notice of Missing Parts
- 3) Transmittal Sheet
- 4) Receipt indication postcard

Please charge Deposit Account No. 50-0893 for the following fees:

Small entity: (a)	Filing Fee (§ 1.16(a)) (Small Entity)	\$ 385.00
(b)	Excess Claims Fees (§ 1.16(b), (c)):	
	124 - 20 = 104 x 9 =	\$ 936.00
	7 - 3 = 4 x 43 =	\$ 172.00
(c)	Multiple Dependent Claim Surcharge	\$ 145.00
(c)	Missing Parts Surcharge	\$ 65.00
TOTAL FEES TO BE CHARGED		\$1703.00

The Commissioner is hereby authorized to charge any additional fees associated with this paper or during the pendency of this application, or credit any overpayment, to Deposit Account No. 50-0893. *This Transmittal Letter is submitted in duplicate.*

Respectfully submitted,


Emily M. Haliday, J.D., Ph.D.
Reg. No. 38,903

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